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.07	oos, no persono are requ.	Application I		09/611,257
TRANSMIT	ΓTAL	Filing Date		July 6, 2000
FORM		First Named	Inventor	Terrance P. SNUTCH
(to be used for all correspondence		Art Unit		1649
(to be ased for all correspondent	o and mad ming	Examiner N	ame	D. KOLKER
Total Number of Pages in This Su	ubmission 8	Attorney Do	cket Number	381092000721
	ENCLOSURES	S (Check all	that apply	/)
X Fee Transmittal Form (1 page 4 duplicate for fee processing)	Drawing(s	s)		After Allowance Communication to TC
Fee Attached	Licensing	g-related Papers		Appeal Communication to Board of Appeals and Interferences
Amendment/Reply	Petition	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
After Final		Petition to Convert to a Provisional Application		Proprietary Information
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address		Status Letter
Extension of Time Request	Terminal	Disclaimer		X Other Enclosure(s) (please Identify below):
Express Abandonment Reques	t Request	Request for Refund		Form PTO/SB/08a/b (1 page + duplicate)
X (3 pages)	ent CD, Num	CD, Number of CD(s)		Copy of 1 Reference Return Receipt Postcard
Certified Copy of Priority Document(s)	Lar	ndscape Table on	CD	
Reply to Missing Parts/ Incomplete Application	Remarks			
Reply to Missing Parts ur	Customer	No. 25225		
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	NATURE OF APPL	ICANT, ATTOR	RNEY, OR	AGENT
Firm Name MORRISON &	FOERSTER LLP		<u></u>	
Signature Vale H	Murach	~		
Printed name Kate H. Murash		0		
Date July 18, 2006			Reg. No.	29,959

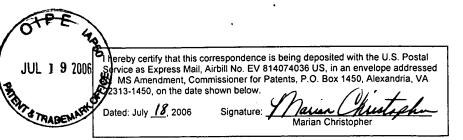
I hereby certify that this corr in an envelope addressed to	espondence is being deposited with the U.S. Postal Service as Express Ma or MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, N	il, Airbill No. EV 814074036 US, /A 22313-1450, on the date
shown below.		
Dated: July 18, 2006	Signature: Marian Muntaghin	(Marian Christopher)

PTO/SB/17 (01-06)
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or the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Complete if Known v suant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 09/611,257 **Application Number** FEE TRANSMITTAL July 6, 2000 Filing Date For FY 2006 Terrance P. SNUTCH First Named Inventor **Examiner Name** D. KOLKER Applicant claims small entity status. See 37 CFR 1.27 1649 Art Unit 381092000721 TOTAL AMOUNT OF PAYMENT (\$) Attorney Docket No.

METHOD OF PAYM	FNT (check all	that apply)						
		*						
Check Cred	lit Card	Money Order	None	Other (please identify	· ———		
x Deposit Account	Deposit Account Num	_{ber:} 03-1952	Deposit Account	Name:	Morri	son & Foerst	er LLP	
For the above-i	dentified deposit	account, the D	Director is he	eby authorize	ed to: (check	all that apply)		
x Charge fe	e(s) indicated be	low		Charge	e fee(s) indic	ated below, ex	cept for th	e filing fee
	ny additional fee(der 37 CFR 1.16		ment of	x Credit	any overpay	ments		•
FEE CALCULATION	N (All the fees	below are d	ue upon fil	ing or may	be subject	to a surcha	rge.)	
1. BASIC FILING, SEA	RCH, AND EXA	MINATION FE	ES					
	FILIN	IG FEES		CH FEES		TION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	300	150	500	250	200	100	0.0	
Design	200	100	100	50	130	65	0.0	
Plant	200	100	300	150	160	80	0.0	
Reissue	300	150	500	250	600	300	0.0	
Provisional	200	100	0	0	0	0	0.0	
2. EXCESS CLAIM FEE	ES							Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (inc	_	•					50	25
Each independent clain	-	ng Reissues)					200	100
Multiple dependent cla	ims						360	180
		Fee (\$)	Fee Paid	(\$)	Mult	tiple Depende		
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3. APPLICATION SIZE	•	a tor, ii grouter an						
If the specification and listings under 37 C sheets or fraction to	d drawings exce FR 1.52(e)), the	application si	ze fee due is	\$250 (\$125 f				ı
Total Sheets	Extra Sheets	Number	of each addit	ional 50 or frac	tion thereof	Fee (\$)	Fee F	Paid (\$)
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4. OTHER FEE(S)								Paid (\$)
Non-English Specif		-		-				.00
Other (e.g., late filir	ng surcharge): 1	806 Submiss	sion of an In	formation Di	isclosure S	tatement	186	0.00

SUBMITTED BY					
Signature	Late 4 Munualin	Registration No. (Attorney/Agent)	29,959	Telephone	(858) 720-5112
Name (Print/Type)	Kate H. Murashige			Date	July 18, 2006



Patent Docket No. 381092000721

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Terrance P. SNUTCH et al.

Serial No.: 09/611,257

Filing Date: July 6, 2000

For: MAMMALIAN T-TYPE CALCIUM

CHANNELS

Examiner: D. Kolker

Group Art Unit: 1649

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. § 1.97 & 1.98

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. § 1.97 and § 1.98, Applicants submit for consideration in the above-identified application the document listed on the attached Form PTO/SB/08a/b. A copy of the document is also submitted herewith. The Examiner is requested to make this document of record.

07/21/2006 GWORDOF1 00000077 031952 09611257

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	This Inf	ormation Disclosure Statement is submitted:
	With t	he application; accordingly, no fee or separate requirements are required.
	Before	e the mailing of a first Office Action after the filing of a Request for Continued
	Exami	ination under § 1.114. However, if applicable, a certification under 37 C.F.R. § 1.97
	(e)(1)	has been provided.
	Within	n three months of the application filing date or before mailing of a first Office Action
	on the	merits; accordingly, no fee or separate requirements are required. However, if
	applic	able, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.
\boxtimes	After	receipt of a first Office Action on the merits but before mailing of a final Office Action
	or Not	tice of Allowance.
		A fee is required. A check in the amount of is enclosed.
	\boxtimes	A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to
		this submission in duplicate.
		A Certification under 37 C.F.R. § 1.97(e) is provided above; accordingly; no fee is
		believed to be due.
	After	mailing of a final Office Action or Notice of Allowance, but before payment of the
	issue f	Fee.
		A Certification under 37 C.F.R. § 1.97(e) is provided above and a check in the
		amount of is enclosed.
		A Certification under 37 C.F.R. § 1.97(e) is provided above and a Fee Transmittal
		form (PTO/SB/17 is attached to this submission in duplicate.)

Applicants would appreciate the Examiner initialing and returning the Form PTO/SB/08a/b, indicating that the information has been considered and made of record herein.

The information contained in this Information Disclosure Statement under 37 C.F.R. § 1.97 and § 1.98 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal form is separated from this document and the Patent and Trademark Office determines that an extension and/or other relief (such as payment of a fee under 37 C.F.R. § 1.17 (p)) is required, Applicants petition for any required relief including extensions of time and authorize the Commissioner to charge the cost of such petition and/or other fees due in connection with the filing of this document to **Deposit Account No. 03-1952** referencing 381092000721.

Dated: July 18, 2006

Respectfully submitted,

Kate H. Murashige

Registration No.: 29,959

MORRISON & FOERSTER LLP

12531 High Bluff Drive

Suite 100

San Diego, California 92130-2040

(858) 720-5112



Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 1 of 1

Complete if Known				
Application Number	09/611,257			
Filing Date	July 6, 2000			
First Named Inventor	Terrance P. SNUTCH			
Art Unit	1649			
Examiner Name	D. Kolker			
Attorney Docket Number	381092000721			

			U.S. PA	TENT DOCUMENTS	
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
				•	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No.¹	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁴ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	۲
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*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²
	1.	McRORY et al., Journal of Biological Chemistry (2001) 276(6):3999-4011	

^{*}EXAMINER: initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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Examiner	Date
Signature	Considered
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¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.